

Please type a plus sign (+) inside this box → ☐

PTO/SB/01 (8-96)  
Approved for use through 9/30/98. OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

☒ Declaration OR ☐ Declaration  
Submitted Submitted after  
with Initial Filing Initial Filing

Attorney Docket Number ADIR 339 PCT US ju

First Named Inventor Daniel LESIEUR

### COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

NEW SUBSTITUTED CYCLIC COMPOUNDS

(Title of the Invention)

the specification of which

☐ is attached hereto  
OR

☒ was filed on (MM/DD/YYYY)

05.10.1999

as United States Application Number or PCT International

Application Number

PCT/FR99/01100

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
9805957	FRANCE	05/12/1998	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

Please type a plus sign (+) inside this box → ☐

PTO/SB/01 (8-95)  
Approved for use through 9/30/98. OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Name	Registration Number	Name	Registration Number
Gordon W. Hueschen	16,157		
G. Patrick Sage	37,710		

☐ Additional registered practitioner(s) named on a supplemental sheet attached hereto.

Direct all correspondence to:

Name	<u>The Firm of Hueschen and Sage</u>		
Address	<u>715 The "H" Building</u>		
Address	<u>310 East Michigan Avenue</u>		
City	<u>Kalamazoo</u>	State	<u>Michigan</u>
ZIP	<u>49007</u>		
Country	<u>USA</u>	Telephone	<u>616 382-0030</u>
Fax	<u>616 382-2030</u>		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name	<u>Daniel</u>	Middle Initial		Family Name	<u>LESIEUR</u>	Suffix e.g. Jr.	
Inventor's Signature	<u>Daniel Lesieur</u>				Date	<u>10 October 2000</u>	

Residence: City	<u>GONDECOURT</u>	State	<u>FR</u>	Country	<u>FRANCE</u>	Citizenship	<u>FR</u>
Post Office Address	<u>20, rue de Verdun</u>						
Post Office Address							
City	<u>GONDECOURT</u>	State	<u>FR</u>	Zip	<u>59147</u>	Country	<u>FRANCE</u>

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

2000-10-10 10:00:00

1-00

Please type a plus sign (+) inside this box → ☐

PTO/SB/01 (8-96)  
Approved for use through 9/30/98. OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

+

<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S) Supplemental Sheet</b>
--------------------	------------------------------------------------------

2-00

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Frédérique	Middle Initial	Family Name	KLIPSCH	Suffix		
Inventor's Signature		Frédérique Klipsch <i>[Signature]</i>			Date	10 October 2000	
Residence: City	HULLUCH	State	FR	Country	FRANCE	Citizenship	FR
Post Office Address		14, rue Malvoisin					
Post Office Address							
City	HULLUCH	State	FR	Zip	62410	Country	FRANCE

3-00

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Gérald	Middle Initial	Family Name	GUILLAUMET	Suffix		
Inventor's Signature		Gerald Guillaumet <i>[Signature]</i>			Date	10 October 2000	
Residence: City	SAINT JEAN LE BLANC	State	FR	Country	FRANCE	Citizenship	FR
Post Office Address		2, impasse Nicolas Poussin					
Post Office Address							
City	SAINT JEAN LE BLANC	State	FR	Zip	45650	Country	FRANCE

4-00

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Marie-Claude	Middle Initial	Family Name	VIAUD	Suffix		
Inventor's Signature		Marie-Claude Viaud <i>[Signature]</i>			Date	10 October 2000	
Residence: City	TOURS	State	FR	Country	FRANCE	Citizenship	FR
Post Office Address		13, place de Châteauneuf					
Post Office Address							
City	TOURS	State	FR	Zip	37000	Country	FRANCE

5-00

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Michel	Middle Initial	Family Name	LANGLOIS	Suffix		
Inventor's Signature		Michel Langlois <i>[Signature]</i>			Date	10 October 2000	
Residence: City	SCEAUX	State	FR	Country	FRANCE	Citizenship	FR
Post Office Address		70, rue du Lycée					
Post Office Address							
City	SCEAUX	State	FR	Zip	92330	Country	FRANCE

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

Please type a plus sign (+) inside this box → ☐

PTO/SB/01 (8-96)  
Approved for use through 9/30/98. OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

+

<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S) Supplemental Sheet</b>
--------------------	------------------------------------------------------

Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
--------------------------------------------	-------------------------------------------------------------------------------

Given Name	<u>Caroline</u>	Middle Initial		Family Name	<u>BENNEJEAN</u>	Suffix e.g. Jr.	
Inventor's Signature	<u>Caroline BENNEJEAN</u>				Date	10 October 2000	
Residence: City	<u>CHARENION LE PONT</u>	State	<u>FR</u>	Country	<u>FRANCE</u>	Citizenship	<u>FR</u>
Post Office Address	<u>139, rue de Paris</u>						
Post Office Address							
City	<u>CHARENION LE PONT</u>	State	<u>FR</u>	Zip	<u>94220</u>	Country	<u>FRANCE</u>

Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
--------------------------------------------	-------------------------------------------------------------------------------

Given Name	<u>Pierre</u>	Middle Initial		Family Name	<u>RENARD</u>	Suffix e.g. Jr.	
Inventor's Signature	<u>Pierre RENARD</u>				Date	10 October 2000	
Residence: City	<u>LE CHESNAY</u>	State	<u>FR</u>	Country	<u>FRANCE</u>	Citizenship	<u>FR</u>
Post Office Address	<u>3, avenue du Parc</u>						
Post Office Address							
City	<u>LE CHESNAY</u>	State	<u>FR</u>	Zip	<u>78150</u>	Country	<u>FRANCE</u>

Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
--------------------------------------------	-------------------------------------------------------------------------------

Given Name	<u>Philippe</u>	Middle Initial		Family Name	<u>DELAGRANGE</u>	Suffix e.g. Jr.	
Inventor's Signature	<u>Philippe DELAGRANGE</u>				Date	10 October 2000	
Residence: City	<u>ISSY LES MOULINEAUX</u>	State	<u>FR</u>	Country	<u>FRANCE</u>	Citizenship	<u>FR</u>
Post Office Address	<u>24, boulevard des Frères Voisins</u>						
Post Office Address							
City	<u>ISSY LES MOULINEAUX</u>	State	<u>FR</u>	Zip	<u>92130</u>	Country	<u>FRANCE</u>

Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
--------------------------------------------	-------------------------------------------------------------------------------

Given Name		Middle Initial		Family Name		Suffix e.g. Jr.	
Inventor's Signature					Date		
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		Zip		Country	

☐ Additional inventors are being named on supplemental sheet(s) attached hereto